Impact of ICDS on Developmental Milestones of Children under Five (2-5Yrs) in Telangana

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Abstract: Children are the nation’s most precious resource, and nurturing children is an investment to ensure a brilliant future for the nation. The ICDS Services is India’s response to the challenge of meeting the holistic needs of the child and is one of the world’s largest and most unique outreach programme for early childhood care and development. So in the present study, an attempt was made to find out the developmental status of children who are attending and not attending anganwadis and study the impact of ICDS on developmental status of children. Developmental schedules were used to assess the 3-5 years old children. Findings of the study revealed there is significant difference between anganwadi and non anganwadi children in cognitive, language and motor areas of development. The children who are attending anganwadi performed better than children who are not attending anganwadi.

Keywords: Anganwadi, cognitive development, language development, motor development

1. Introduction

India is home to the largest number of children in the world, significantly larger than the number in China. The country has 20 per cent of the 0-4 years’ child population of the world. Therefore, the progress that India makes towards achieving the Millenium Development Goals (MDGs) and targets related to children will continue to determine the progress that the world will make towards achieving the MDGs. ICDS is the foremost symbol of India’s commitment to her children – India’s response to the challenge of providing pre-school education on one hand and breaking the vicious cycle of malnutrition, morbidity, reduced learning capacity and mortality, on the other. The present study was taken up to study the Impact of ICDS on the development milestones of children under five in Andhra Pradesh villages.

2. Sample

The study was conducted in Mahabubnagar district of Telangana state. Hundred children attending 6 selected anganwadis were selected randomly, of them 54 were boys and 46 were girls. Twenty non anganwadi children were selected from the same region of which 12 were boys and 8 were girls.

3. Tools and Techniques Used

Interview schedule, Bayley scale of infant and toddler development, Developmental schedule, were used to assess the developmental status. Frequency, percentage, mean, standard deviation (S.D), unequal sample t-test were used to analyze the collected data.

4. Results and Discussion

Table 1: Cognitive, motor and language development in children who are attending anganwadi and not attending anganwadi

<table>
<thead>
<tr>
<th>S. No</th>
<th>Development Areas</th>
<th>Age in years</th>
<th>Attending Anganwadies (n=100)</th>
<th>Not Attending Anganwadi (n=20)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>High</td>
<td>Average</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>N %</td>
<td>n %</td>
</tr>
<tr>
<td>1.</td>
<td>Cognitive</td>
<td>2-3</td>
<td>13</td>
<td>19.4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3-4</td>
<td>12</td>
<td>19.4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4-5</td>
<td>11</td>
<td>16.4</td>
</tr>
<tr>
<td>2.</td>
<td>Motor</td>
<td>2-3</td>
<td>27</td>
<td>43.3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3-4</td>
<td>21</td>
<td>35.3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4-5</td>
<td>16</td>
<td>26.6</td>
</tr>
<tr>
<td>3.</td>
<td>Language</td>
<td>2-3</td>
<td>31</td>
<td>46.2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3-4</td>
<td>16</td>
<td>25.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4-5</td>
<td>8</td>
<td>12.5</td>
</tr>
</tbody>
</table>

From the above table we can clearly say that anganwadi children performed better on cognitive skills than non-anganwadi children. In 2-3 years age group 50 per cent of anganwadi children were in average level but none of the non anganwadi children were in high and average levels of cognitive development. Most of anganwadi children in age group of 3.1-4 year old scored average in cognitive development, whereas 40 percent of the non-anganwadi children were in low levels of cognitive development. Interestingly all the selected anganwadi children in age group 4-5 years have high cognitive development scores where as non anganwadi children of the same age group

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were in average and low levels of cognitive development. Similar results were found by Sharma (2004), which revealed that cognitive abilities of preschools who availed the ICDS package services were significantly better than that of non-ICDS group.

Motor development in anganwadi children is more than non-anganwadi children. From the above table we can find that in age group 2.1-3years 25 per cent of selected anganwadi sample were in high range of development whereas as we did not find any non-anganwadi children in this high range category and 25per cent of them were in average and 15per cent were in low category of motor development. All selected anganwadi children in age group of 3-5 years were in high category of development whereas very few (15%) percent of non anganwadi children in high range of motor development. The findings of present study is in line with results of Kavitha & Khadi(2004), who revealed that ICDS programme had significant impact on motor and mental development of toddlers.

From the above table it can also be infer that overall anganwadi children had better language development than the non anganwadi children. If we compare 2-3 year old anganwadi and non-anganwadi children, we find 46percent of anganwadi children in high range of language development whereas as we find non-anganwadi in average(25%) and low (15%) levels of language development. Fifty nine percent of 3-4 years anganwadi children were in high level of language development and non-anganwadi of the same age were fallen under average and low levels of language development. It is encouraging to note that selected anganwadi children in age group of 4-5 years ranked high (16.4%) and average(2%) in language development whereas 15% of the selected non-anganwadi children were placed in average (10%) and low (5%)levels of language development. This finding clearly depicts the existence of impoverished and un stimulating home environment in rural areas. Even Khosla and Kataria (1986) assessed the impact of preschool education component on the languages and cognitive development of children at anganwadis and revealed that children attending anganwadi performed significantly better.

The above table establishes the fact that there is significant difference in cognitive development of anganwadi and non anganwadi children. The children who are attending anganwadi performed better than children who are not attending anganwadi in cognitive task. The findings of present study is in line with results of Rajni Dhangra (2012), who found that Anganwadi children performed better on all the dimensions of cognitive development. Children who are attending anganwadi were having physical stimulating activities like outdoor play activities involving gross and fine motor skills and nutritious supplementary food which helped them to have better motor development. The study establishes the significance of anganwadi in promoting the development of the child. It can be inferred from above table that there is a significant difference in language development of anganwadi and non-anganwadi children. Stimulating environment in anganwadi with activities like storytelling, rhymes, informal talk created a marked difference in language development in anganwadi and non anganwadi children.

5. Conclusions

In present study it was found that children in age group of 2-3 years placed in average and low levels of cognitive development where as 4-5years achieved high score in cognitive development. With increase in age the cognitive language and motor areas of development also increases in first five years of life. Anganwadi children performed better on cognitive skills than non-anganwadi children. Anganwadi children are better in language development than the children who are not attending anganwadi. Motor development is better in anganwadi children than their counterparts. A significant difference in cognitive, language and motor areas of development can be found between anganwadi and non anganwadi children.

References


